

10/389009

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| TOTAL CLAIMS                     |    |              |                          |
|----------------------------------|----|--------------|--------------------------|
| FOR                              |    | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 21 | minus 20 =   | 1                        |
| INDEPENDENT CLAIMS               | 7  | minus 3 =    | 4                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |    |              | <input type="checkbox"/> |

SMALL ENTITY  
TYPE  OTHER THAN  
OR SMALL ENTITY

| RATE      | FEES   | RATE         | FEES   |
|-----------|--------|--------------|--------|
| BASIC FEE | 370.00 | OR BASIC FEE | 340.00 |
| X\$ 9 =   |        | OR X\$18 =   | 15     |
| X42 =     |        | OR X84 =     | 336    |
| +140 =    |        | OR +280 =    |        |
| TOTAL     |        | OR TOTAL     | 1068   |

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-------------|---|------------------|
|  | Total                                     | Independent | Minus                                       | Minus            |
|  | 13  | 3           | 21  | 10               |
|  | 13  | 3           | 7   | 8                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |             | <input type="checkbox"/>                    |                  |

SMALL ENTITY  
OTHER THAN  
OR SMALL ENTITY

| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
|------------------|------------------------|---------------------|------------------------|
| X\$ 9 =          |                        | OR X\$18 =          | 1                      |
| X42 =            |                        | OR X84 =            |                        |
| +140 =           |                        | OR +280 =           |                        |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |

| AMENDMENT B                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-------------|---|------------------|
|  | Total                                     | Independent | Minus                                       | Minus            |
|  | 13  | 3           | 21  | 10               |
|  | 13  | 3           | 7   | 8                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |             | <input type="checkbox"/>                    |                  |

| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
|------------------|------------------------|---------------------|------------------------|
| X\$ 9 =          |                        | OR X\$18 =          |                        |
| X42 =            |                        | OR X84 =            |                        |
| +140 =           |                        | OR +280 =           |                        |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |

| AMENDMENT C                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-------------|---|------------------|
|  | Total                                     | Independent | Minus                                       | Minus            |
|  | 17  | 9           | 21  | 12               |
|  | 17  | 9           | 7   | 2                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |             | <input type="checkbox"/>                    |                  |

| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
|------------------|------------------------|---------------------|------------------------|
| X\$ 9 =          |                        | OR X\$18 =          |                        |
| X42 =            | 416                    | OR X84 =            |                        |
| +140 =           |                        | OR +280 =           |                        |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3"
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1